| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | M | 79 | 08-22-0 |
| O.I.P.E. CLASSIFIER | | | 8 31/01 |
| FORMALITY REVIEW | UF | 10.50 | 09-28-01 |
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| ÷ | ............................... Restricted | O | ............................... Objected |

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If more than 150 claims or 10 actions
staple additional sheet here

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